



Complete Summary

TITLE

Child and adolescent major depressive disorder: percentage of patients aged 6 through 17 years with a diagnosis of major depressive disorder with documented evidence that they met the DSM-IV criteria [at least 5 elements with symptom duration of two weeks or longer, including 1) depressed mood (*can be irritable mood in children and adolescents*) or 2) loss of interest or pleasure] during the visit in which the new diagnosis or recurrent episode was identified.

SOURCE(S)

Physician Consortium for Performance Improvement®. Child and adolescent major depressive disorder physician performance measurement set. Chicago (IL): American Medical Association (AMA); 2008 Sep. 30 p. [13 references]

Measure Domain

PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess the percentage of patients aged 6 through 17 years with a diagnosis of major depressive disorder with documented evidence that they met the Diagnostic and Statistical Manual of Mental Disorders, 4th Edition (DSM-IV) criteria [at least 5 elements with symptom duration of two weeks or longer, including 1) depressed mood (*can be irritable mood in children and adolescents*) or 2) loss of interest or pleasure] during the visit in which the new diagnosis or recurrent episode was identified.

The criteria for a major depressive disorder episode includes five (or more) of nine specific symptoms:

- Depressed mood (**Note:** in children and adolescents, can be irritable mood)
- Marked diminished interest/pleasure
- Significant weight loss or gain (**Note:** in children, consider failure to make expected weight gains)
- Insomnia or hypersomnia
- Psychomotor agitation/ retardation
- Fatigue or loss of energy
- Feelings of worthlessness
- Diminished ability to concentrate
- Recurrent suicidal ideation

which have been present during the same two-weeks period and represent a change from previous functioning; at least one of the symptoms is either 1) depressed mood or 2) loss of interest or pleasure.

Note: The essential feature of a major depressive disorder is a period of at least two weeks during which there is either depressed mood or irritability or the loss of interest or pleasure in nearly all activities. **In children and adolescents, can be irritable or cranky mood.**

RATIONALE

Depression in children and adolescents is often underdiagnosed; one-quarter to one-half of all cases of major depressive disorders are estimated to be properly recognized by primary care and non-psychiatric practitioners. Thorough assessment of depressive symptoms sets the basis for accurate diagnosis and treatment of major depressive disorder.

The following clinical recommendation statements are quoted verbatim from the referenced clinical guidelines and represent the evidence base for the measure:

A comprehensive psychiatric diagnostic evaluation is the single most useful tool currently available to diagnose depressive disorders. (American Academy of Child and Adolescent Psychiatry [AACAP], 2007)

Patients with major depressive disorder symptoms should receive a thorough diagnostic evaluation to 1) confirm the diagnosis of a major depressive disorder and 2) reveal the presence of other psychiatric or general medical conditions. (American Psychiatric Association [APA], 2007)

The criteria for a major depressive disorder episode include five (or more) of nine specific symptoms which have been present during the same two-week period and represent a change from previous functioning; at least one of the symptoms is either 1) depressed mood or 2) loss of interest or pleasure. In addition, these symptoms do not meet criteria for a mixed episode (e.g., criteria for both a manic episode and for major depressive disorder are exhibited nearly daily). The symptoms cause clinically significant distress or impairment in social, occupations, or other important areas of functioning. The symptoms are not due to the direct physiological effects of a substance or general medical condition. The symptoms are not due to bereavement and they persist longer than two months. The symptoms may be characterized by marked functional impairment, morbid preoccupation with worthlessness, suicidal ideation, psychotic symptoms, or psychomotor retardation. (Diagnostic and Statistical Manual of Mental Disorders, 4th Edition [DSM-IV])

In children and adolescents, an irritable or cranky mood may develop rather than a sad or dejected mood. (DSM-IV)

PRIMARY CLINICAL COMPONENT

Child and adolescent major depressive disorder; documented evidence of Diagnostic and Statistical Manual of Mental Disorders, 4th Edition (DSM-IV) criteria

DENOMINATOR DESCRIPTION

All patients aged 6 through 17 years with a diagnosis of major depressive disorder

Note: Refer to the original measure documentation for administrative codes.

NUMERATOR DESCRIPTION

Patients with documented evidence that they met the Diagnostic and Statistical Manual of Mental Disorders, 4th Edition (DSM-IV) criteria [at least 5 elements with symptom duration of two weeks or longer, including 1) depressed mood (*can be irritable mood in children and adolescents*) or 2) loss of interest or pleasure] during the visit in which the new diagnosis or recurrent episode was identified

Note: Refer to the original measure documentation for administrative codes.

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence
- One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

NATIONAL GUIDELINE CLEARINGHOUSE LINK

- [Practice parameters for the assessment and treatment of children and adolescents with depressive disorders.](#)

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Variation in quality for the performance measured

EVIDENCE SUPPORTING NEED FOR THE MEASURE

Depression Guideline Panel. Depression in primary care: volume 1. Detection and diagnosis. Rockville (MD): U.S. Department of Health and Human Services, Public Health Service, Agency for Health Care Policy and Research (AHCPR); 1993. (Clinical practice guideline; no. 5).

Katon WJ, Richardson L, Russo J, Lozano P, McCauley E. Quality of mental health care for youth with asthma and comorbid anxiety and depression. Med Care 2006 Dec;44(12):1064-72. [PubMed](#)

Kerr E. Depression. In: McGlynn E, Damberg C, Kerr E, Schuster M, editor(s). Quality of care for children and adolescents: a review of selected clinical conditions and quality indicators. Santa Monica: RAND; 2000. p. 141-55.

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Physician Group Practices/Clinics

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Individual Clinicians

TARGET POPULATION AGE

Ages 6 through 17 years

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

See the "Rationale" field.

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Getting Better

IOM DOMAIN

Effectiveness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

All patients aged 6 through 17 years with a diagnosis of major depressive disorder

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

All patients aged 6 through 17 years with a diagnosis of major depressive disorder

Note: Refer to the original measure documentation for administrative codes.

Exclusions

None

RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

DENOMINATOR (INDEX) EVENT

Clinical Condition

DENOMINATOR TIME WINDOW

Time window is a single point in time

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

Patients with documented evidence that they met the Diagnostic and Statistical Manual of Mental Disorders, 4th Edition (DSM-IV) criteria [at least 5 elements with symptom duration of two weeks or longer, including 1) depressed mood (*can be irritable mood in children and adolescents*) or 2) loss of interest or pleasure] during the visit in which the new diagnosis or recurrent episode was identified

Note: Refer to the original measure documentation for administrative codes.

Exclusions

None

MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

NUMERATOR TIME WINDOW

Encounter or point in time

DATA SOURCE

Administrative data
Medical record

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Unspecified

Identifying Information

ORIGINAL TITLE

Measure #2: diagnostic evaluation.

MEASURE COLLECTION

[The Physician Consortium for Performance Improvement® Measurement Sets](#)

MEASURE SET NAME

[Child and Adolescent Major Depressive Disorder Physician Performance Measurement Set](#)

SUBMITTER

American Medical Association on behalf of the Physician Consortium for Performance Improvement®

DEVELOPER

Physician Consortium for Performance Improvement®

FUNDING SOURCE(S)

Unspecified

COMPOSITION OF THE GROUP THAT DEVELOPED THE MEASURE

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FINANCIAL DISCLOSURES/OTHER POTENTIAL CONFLICTS OF INTEREST

Conflicts, if any, are disclosed in accordance with the Physician Consortium for Performance Improvement® conflict of interest policy.

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2008 Sep

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

Physician Consortium for Performance Improvement®. Child and adolescent major depressive disorder physician performance measurement set. Chicago (IL): American Medical Association (AMA); 2008 Sep. 30 p. [13 references]

MEASURE AVAILABILITY

The individual measure, "Measure #2: Diagnostic Evaluation," is published in "Child and Adolescent Major Depressive Disorder Physician Performance Measurement Set." This document and technical specifications are available in Portable Document Format (PDF) from the American Medical Association (AMA)-convened Physician Consortium for Performance Improvement® Web site: www.physicianconsortium.org.

For further information, please contact AMA staff by e-mail at cqi@ama-assn.org.

NQMC STATUS

This NQMC summary was completed by ECRI Institute on March 2, 2009. The information was verified by the measure developer on April 13, 2009.

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